

## Inspection Evidence Table

Birtley Medical Group

(1-570812163)

**Inspection Date:**

Date of data download: 06/11/2023

**Responsive**

**Rating: Requires improvement**

At our previous inspection in (20 May 2021) the responsive key question was rated good. Following this assessment, we have rated the practice as requires improvement for providing responsive services.

We recognise the pressure that practices are currently working under and the efforts staff are making to maintain levels of access for their patients. At the same time, our strategy makes a commitment to deliver regulation driven by people's needs and experiences of care.

Although we saw the practice was attempting to improve access, this was not yet reflected in the GP patient survey data or some of the other sources of patient feedback. Therefore, the rating is requires improvement, as ratings depend on evidence of impact and must reflect the lived experience that people were reporting at the time of this assessment.

**Responding to and meeting people's needs**

**The practice organised and delivered services to meet patients' needs.**

	Y/N/Partial
The practice understood the needs of its local population and had developed services in response to those needs.	Yes
The importance of flexibility, informed choice and continuity of care was reflected in the services provided.	Yes
The facilities and premises were appropriate for the services being delivered. <i>* We did not visit the premises as part of this assessment</i>	-
The practice made reasonable adjustments when patients found it hard to access services.	Yes
There were arrangements in place for people who need translation services.	Yes
The practice complied with the Accessible Information Standard.	Yes

### Practice Opening Times

Day	Time
Opening times:	

Monday	7am - 6pm
Tuesday	7am - 6pm
Wednesday	7am - 8pm
Thursday	7am - 6pm
Friday	7am - 6pm
Appointments available:	
Monday	7am – 5:30pm
Tuesday	7am – 5:30pm
Wednesday	7am – 7:30pm
Thursday	7:15am – 5:30pm
Friday	7:15am – 5:30pm

#### Further information about how the practice is responding to the needs of their population

- Patients had a named GP who supported them in whatever setting they lived.
- The practice was open from 7am each day to enable access for working age patients and they offered GP, ANP, practice nurse, contraception, and phlebotomy appointments early morning.
- All parents or guardians calling with urgent concerns about a child are offered a same day appointment.
- Nurse appointments were available until 7pm on a Wednesday for school age children so that they did not need to miss school.
- Out of hours services are provided by 111 and extended access appointments are provided by a local provider, Community Based Care (CBC) where late evening and weekend appointments were available.
- Services offered included, COVID and influenza walk-in appointments, contraceptive coil and implant service for patients, minor surgery and joint injection service, warfarin monitoring service and a midwife held a clinic in the practice twice a week.
- Vulnerable patients were offered home visits, this included care home residents, housebound patients and other patients with identified vulnerabilities. There were alerts on the clinical system to ensure the staff were aware of these patients. The practice holds a register of patients living in vulnerable circumstances including those with a learning disability and people with mental health issues.
- Reception staff were trained in care navigation so they could refer patients to the correct appointment with the right health care professional and at the right time.
- The practice could refer patients to a mental health practitioner, a drug and alcohol worker and a social prescribing link worker to help patients to receive the help they need. There were two trainee psychotherapists on placements at the practice who could offer a counselling service to patients.
- The practice have a higher-than-average Traveller population. The social prescribing link worker and nursing team worked with the Traveller community promote access to services and uptake of vaccinations and to monitor those patients on the chronic disease register.
- People in vulnerable circumstances are easily able to register with the practice, including Travellers and homeless people. Reception staff assisted with the completion of forms for patients who are illiterate, and they offered online registration. Reception staff had an awareness of the needs of non-English speakers.
- There were two named GPs for palliative patients. This ensured a quicker response to their needs and continuity of care.

## Access to the service

### People could not always access care and treatment in a timely way.

	Y/N/Partial
Patients had timely access to appointments/treatment and action was taken to minimise the length of time people waited for care, treatment or advice.	*Partial
The practice offered a range of appointment types to suit different needs (e.g. face to face, telephone, online).	Yes
Patients were able to make appointments in a way which met their needs.	*Partial
There were systems in place to support patients who face communication barriers to access treatment (including those who might be digitally excluded).	Yes
Patients with most urgent needs had their care and treatment prioritised.	Yes
There was information available for patients to support them to understand how to access services (including on websites and telephone messages).	Yes
<p>Explanation of any answers and additional evidence:</p> <p>*The GP national survey results (see table below) were lower than local and national averages.</p> <p>* There were 4 out of 8 complaints on the NHS choices website (see table below) relating to access to appointments.</p> <p>* CQC received 2 complaints in the last 12 months relating to access to appointments (see table below).</p> <ul style="list-style-type: none"> <li>The percentage of respondents to the GP patient survey who responded positively to how easy it was to get through to someone at their GP practice on the phone was 14.8%. This indicator had been consistently lower than the national average since 2019 by at least 21%.</li> <li>The percentage of respondents to the GP patient survey who responded positively to the overall experience of making an appointment was 30%. This indicator was consistently below national averages since 2019 by at least 26%.</li> <li>The percentage of respondents to the GP patient survey who were very satisfied or fairly satisfied with their GP practice appointment times was 25.8%. This indicator was consistently below the national average since 2019 by at least 16%.</li> <li>The percentage of respondents to the GP patient survey who were satisfied with the appointment (or appointments) they were offered was 56.2%. This indicator was below the national average of 74.4%.</li> <li>The practice told us that they felt that the reasons the survey results in 2023 were low was because they had just installed a new telephone system at the time of the survey and they had experienced problems implementing it, which they felt had now been resolved as they had not received many recent complaints.</li> <li>After every GP national survey an action plan had been put in place including in March 2023 after the results of the 2023 survey were known.</li> <li>The practice provided us with a copy of the action plan. Actions included, for example, more staff being available early on a morning to answer calls when the phone lines were busy, promoting how patients can access information online, reviewing do not attend (DNA) appointments which were at 7% to try and ensure patients either attended or cancelled their appointment.</li> </ul> <p>The practice carried out their own surveys in March and August 2023, one with a higher response rate than the GP national survey (responses 118) to assess progress with actions taken.</p> <ul style="list-style-type: none"> <li>In March 2023 with a response rate of 23;</li> </ul>	

% of patients who responded positively to how easy it was to get through to the GP Practice was 52%.  
% of patients who responded positively to the overall experience of making an appointment was 30%.

- In August 2023 response rate 428;  
% of patients who responded positively to how easy it was to get through to the GP Practice was 75%.  
% of patients who responded positively to the overall experience of making an appointment was 84%.

Due to the enhancement of the practice telephone system, they were able to carry out an audit of the time to answer telephone calls recently, which showed an increasing improvement in the answering of calls;

- August 2023 – 8729 calls – 77% answered in 15 minutes, 47% in less than 5 minutes.
- September 2023 – 10798 calls (increase in calls due to COVID/Flu vaccinations available) – 72% answered in 15 minutes, 42% in less than 5 minutes.
- October 2023 – 9661 calls – 82% answered in 15 minutes, 52% in less than 5 minutes.
- November 2023 – 8720 calls – 87% answered in 15 minutes, 53% in less than 5 minutes.

Further work which the practice shared with us to improve access included;

- The introduction of text messaging service which sends appointment reminders and allows patients to cancel appointments.
- A review of capacity and demand for appointments, this included a review of appointment numbers, staffing levels, phone reports and appointment types. Increased demand for urgent care from patients and more complex patients, was identified which led to a high demand on GP time.

Measures which have been taken in response to the above review and their own analysis included:

- Recruitment of an additional five session GP.
- Recruitment of additional reception staff to improve phone waiting times.
- Changing of staff hours to ensure more staff answer phones at 7am.
- The operations manager's work being freed up so they could actively manage patient access to the telephone and review the appointments to ensure they are appropriate.
- Recruitment of additional clinical pharmacists to create more capacity for medication reviews and chronic disease reviews which freed up GP time.
- Introduction of online bookable appointments with advanced nurse practitioners (ANP).
- Introduction of pre bookable appointments with GPs from 7:15am to 8:30am each morning and from 6-8pm on a Wednesday to make it easier for working people to book appointments.
- ANP triage of all eConsult's, treating what they can on the day or referring to a GP or booking into a GP appointment.
- The recruitment of 2 additional practice nurses who are experienced in clinical triage in A&E who can help when urgent appointments are full. This has helped to free up 40 ANP appointment slots per week.
- The practice have held meetings with a local councillor to develop links and discuss concerns around access to appointments. They are now more informed on the issues involved with patient access and are able to communicate these with constituents.
- The practice designed monthly 'you said we did' posters which they shared on their social media page, website and on the TV in the reception area, this included information such as, recruitment of an additional GP and how to be involved in providing feedback on services. The practice had received several positive comments on their social media page recently from patients.
- The practice had recently undertaken a general practice improvement programme which focused on access needs of patients. GPs were surveyed to see if the appointments with patients they were allocated were appropriate, or if they could have been seen by another clinician. This showed that they felt they were mostly seeing appropriate patients, which demonstrated that the care navigators were signposting patients effectively.

## National GP Patient Survey results

Note: From July 2022, CCGs have been replaced with Sub Integrated Care Board Locations (SICBL) and CCG ODS codes have been retained as part of this.

Indicator	Practice	SICBL average	England	England comparison
The percentage of respondents to the GP patient survey who responded positively to how easy it was to get through to someone at their GP practice on the phone (01/01/2023 to 30/04/2023)	14.8%	N/A	49.6%	Significant variation (negative)
The percentage of respondents to the GP patient survey who responded positively to the overall experience of making an appointment (01/01/2023 to 30/04/2023)	30.0%	59.0%	54.4%	Tending towards variation (negative)
The percentage of respondents to the GP patient survey who were very satisfied or fairly satisfied with their GP practice appointment times (01/01/2023 to 30/04/2023)	25.8%	56.9%	52.8%	Variation (negative)
The percentage of respondents to the GP patient survey who were satisfied with the appointment (or appointments) they were offered (01/01/2023 to 30/04/2023)	56.2%	74.4%	72.0%	Tending towards variation (negative)

Source	Feedback
NHS.uk website (formerly NHS Choices)	There have been 8 reviews left on this site in the last 12 months. Reviews are given a rating of between 1-5 with five being the most positive. There were three, 5-star reviews, one 3-star review and four 1-star reviews. The four 1-star and 3-star reviews all related to access to the service, not being able to get through on the telephone and being unable to obtain an appointment. The three, 5-star reviews were feedback on excellent and first-class service the patients had received. The practice had responded to all of the reviews left on the site in writing, for the negative reviews had encouraged the patients to make a formal complaint.
Complaints to CQC in the last 12 months	There were 2 complaints received from patients in the last 12 months which both related to access.
Share your experience of care	When we announced the assessment, we sent out a link to the practice to share with patients to give us feedback. We received 3 responses of which 2 were positive and 1 mixed. Comments included good and fantastic care. One patient said they saw a nurse when they wanted to see a GP, however the care was good.
Feedback from the practice patient participation group (PPG)	We asked the practice to submit to us feedback from the PPG. They forwarded to us 2 responses.

	The first patient said they had no problems with access themselves to the surgery, however they believed it was hard for patients to go to the surgery for 7am to obtain an appointment. They said they would benefit from a more streamlined service. Patients could not see the doctor of their choice. The second patient said the current telephone booking system put pressure on the patient to contact the practice early on a morning to be able to obtain an appointment.
Results from NHS friends and family test	The practice sent us results of their NHS friends and family test, monthly from July to November 2023. The results for how likely a patient would recommend the practice to friends and family was gradually increasing from 57% (likely or extremely likely) in July to 76% in November 2023.

### Listening and learning from concerns and complaints

**Complaints were listened and responded to and used to improve the quality of care.**

Complaints	
Number of complaints received in the last year.	18
Number of complaints we examined.	2
Number of complaints we examined that were satisfactorily handled in a timely way.	18
Number of complaints referred to the Parliamentary and Health Service Ombudsman.	0

	Y/N/Partial
Information about how to complain was readily available.	Yes
There was evidence that complaints were used to drive continuous improvement.	Yes

Example(s) of learning from complaints.

Complaint	Specific action taken
A patient made a complaint regarding a consultation	<p>A patient made a complaint that they had not been listened to in their consultation. An investigation was carried out and learning taken from this;</p> <ul style="list-style-type: none"> <li>Any complaint re further clinical advice should be dealt with by a GP.</li> <li>Any message regarding this should be in writing.</li> <li>Further training was carried out as a result of the complaint</li> </ul>

## Notes: CQC GP Insight

GP Insight assesses a practice's data against all the other practices in England. We assess relative performance for the majority of indicators using a "z-score" (this tells us the number of standard deviations from the mean the data point is), giving us a statistical measurement of a practice's performance in relation to the England average. We highlight practices which significantly vary from the England average (in either a positive or negative direction). We consider that z-scores which are higher than +2 or lower than -2 are at significant levels, warranting further enquiry. Using this technique, we can be 95% confident that the practices performance is genuinely different from the average. It is important to note that a number of factors can affect the Z score for a practice, for example a small denominator or the distribution of the data. This means that there will be cases where a practice's data looks quite different to the average, but still shows as no statistical variation, as we do not have enough confidence that the difference is genuine. There may also be cases where a practice's data looks similar across two indicators, but they are in different variation bands.

The percentage of practices which show variation depends on the distribution of the data for each indicator but is typically around 10-15% of practices. The practices which are not showing significant statistical variation are labelled as no statistical variation to other practices.

N.B. Not all indicators in the evidence table are part of the GP insight set and those that aren't will not have a variation band.

The following language is used for showing variation:

Variation Bands	Z-score threshold
Significant variation (positive)	$\leq -3$
Variation (positive)	$> -3$ and $\leq -2$
Tending towards variation (positive)	$> -2$ and $\leq -1.5$
No statistical variation	$< 1.5$ and $> -1.5$
Tending towards variation (negative)	$\geq 1.5$ and $< 2$
Variation (negative)	$\geq 2$ and $< 3$
Significant variation (negative)	$\geq 3$



Note: for the following indicators the variation bands are different:

- Child Immunisation indicators. These are scored against the World Health Organisation target of 95% rather than the England average. Note that practices that have “Met 90% minimum” have not met the WHO target of 95%.
- The percentage of respondents to the GP patient survey who responded positively to how easy it was to get through to someone at their GP practice on the phone uses a rules-based approach for scoring, due to the distribution of the data. This indicator does not have a CCG average.
- The percentage of persons eligible for cervical cancer screening at a given point in time who were screened adequately within a specified period (within 3.5 years for those aged 25 to 49, and within 5.5 years for those aged 50 to 64). This indicator does not have a CCG average and is scored against the national target of 80%.

It is important to note that z-scores are not a judgement in themselves, but will prompt further enquiry, as part of our ongoing monitoring of GP practices.

Guidance and Frequently Asked Questions on GP Insight can be found on the following link:

<https://www.cqc.org.uk/guidance-providers/gps/how-we-monitor-gp-practices>

Note: The CQC GP Evidence Table uses the most recent validated and publicly available data. In some cases at the time of inspection this data may be relatively old. If during the inspection the practice has provided any more recent data, this can be considered by the inspector. However, it should be noted that any data provided by the practice will be unvalidated and is not directly comparable to the published data. This has been taken into account during the inspection process.

#### **Glossary of terms used in the data.**

- **COPD:** Chronic Obstructive Pulmonary Disease.
- **UKHSA:** UK Health and Security Agency.
- **QOF:** Quality and Outcomes Framework.
- **STAR-PU:** Specific Therapeutic Group Age-sex weightings Related Prescribing Units. These weighting allow more accurate and meaningful comparisons within a specific therapeutic group by taking into account the types of people who will be receiving that treatment.
- ‰ = per thousand.